



# Application for a Land Disturbance Permit

290 E Central St Springfield, MO 65802 ·

Phone (417) 864-1944 · Fax (417) 864-1499 · Email: [sedavis@springfieldmo.gov](mailto:sedavis@springfieldmo.gov)

Project Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Recorded Property Owner: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
(Please Print)

Property Owner's Email Address: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip)

Telephone # \_\_\_\_\_

**Type of Development Proposed:** (Check all that apply)

\_\_\_\_ Excavation, grading, or filling only      \_\_\_\_ Road/street construction  
\_\_\_\_ Site grading for building      \_\_\_\_ Utility construction  
\_\_\_\_ Subdivision

**TOTAL ACREAGE OF SITE:** \_\_\_\_\_ **ACRES**

**TOTAL LAND DISTURBED:** \_\_\_\_\_ **ACRES**

Time needed for completion of work: \_\_\_\_\_

*Submittal of this application and/or permit fee does not imply that the permit has been or will be authorized or issued. Should it be determined during the review process of the SWPPP that the area to be disturbed is more or less than that represented on the application, the permit fee will be adjusted according to the fee schedule.*

**I hereby certify that I am the legal owner of the property for which this permit is requested or his/her legally authorized agent.**

Please **Use Ink** to Print Name and Sign

Signature

Date